|  |  |  |
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| logo | Licensing and Regulation1025 Union Ave SEPO Box 43098 Olympia WA 98504-3098Phone: 360 664-1600 Fax: 360 753-2710[www.lcb.wa.gov](http://www.lcb.wa.gov)  |       |
| License Number |
|       |
| Trade Name |
|       |
| UBI Number |
| **Financial Statement for Person or Entity Loaning, Gifting, or Investing Money** |

Please type or print clearly in dark ink. Complete all spaces or print N/A in spaces that do not apply. Attach additional sheets as needed in same format.

|  |  |
| --- | --- |
| **NAME OF BUSINESS AND PERSON TO WHICH MONEY IS BEING LOANED, GIFTED OR INVESTED:**: |   |

|  |  |  |
| --- | --- | --- |
| YOUR NAME/ENTITY NAME: *Last*   | *First* | *Middle* |
| DOB:  | DAY PHONE( ) |
| MAILING ADDRESS: *Street/Route/PO Box* | *City* | *County* | *State or Country* | *Zip Code* |

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| --- |
| **EMPLOYMENT HISTORY OR DATES ENTITY HAS BEEN IN BUSINESS**  |

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| --- |
| **EMPLOYMENT HISTORY**  (List employment, self-employment, military service, school attendance or unemployment for the last **5 years**). |
| **Dates From - To:** | **Title:** | **Employer/School** |
| **ADDRESS: Street or Route** | **City** | **State or Country** |
| **Dates From - To:** | **Title:** | **Employer/School** |
| **ADDRESS: Street or Route** | **City** | **State or Country** |
| **Dates From - To:** | **Title:** | **Employer/School** |
| **ADDRESS: Street or Route** | **City** | **State or Country** |

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| **ASSETS** |

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| **A** | **BANK and INVESTMENT ACCOUNTS**  (List all bank and investment accounts you have signature authority over, and any accounts of which you are the beneficiary).  |
| **BANK NAME** | **ACCOUNT TYPE** | **ACCOUNT NUMBER** | **BALANCE** | **AUTHORIZED SIGNATURE(S)** |
| 1.   |  |  |  |  |
| 2.   |  |  |  |  |
| 3.   |  |  |  |  |
| 4.   |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **B** | **INCOME** | **SELF/ENTITY** | **SPOUSE** (if applicable) |
| MONTHLY SALARY | $   | $   |
| AVERAGE MONTHLY  | $   | $   |
| OTHER MONTHLY INCOME | $   | $   |

|  |  |
| --- | --- |
|  | Liquor License No.   |
| **C** | TOTAL CASH OTHER THAN IN BANK: $   | LOCATION OF CASH:   |

|  |  |
| --- | --- |
| **D** | **REAL ESTATE OWNED** |
| **ADDRESS OF PROPERTY COVERED** | **COUNTY** | **TOWNSHIP/RANGE/ SECTION** | **TITLE IN NAME OF** | **VALUE OF LAND AND/OR BUILDING** | **MONTHLY RENT PAID TO YOU** |
|  |  |  |  |  |  |
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| --- | --- |
| **E** | **NOTES AND ACCOUNTS RECEIVABLE (Moneys owed to you and/or your business - - including this loan)** |
| **FROM WHOM (Full name, address)** | **MONTHLY PYMT** | **CURRENT BALANCE** | **DUE DATE** |
|   |   |   |   |
|   |   |   |   |

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| **LIABILITIES** |

|  |  |
| --- | --- |
| **A** | **MORTGAGES AND CONTRACT OWING (Including rent/lease payments)** |
| **ADDRESS OF PROPERTY COVERED** | **FULL NAME OF LENDER / LANDLORD** | **CURRENT BALANCE** | **MONTHLY PYMT** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

I certify that this Financial Statement is true and accurate as of this date. I hereby authorize investigation of my financial records and other sources as necessary.

|  |  |  |
| --- | --- | --- |
| Signature   | Print Name  | Date  |